	CLAIMS A	ective December			18	1588,03
			1	SUMA		/ 00
U.S. NATIONAL S	AGE FEES	(Column 1)	(Column 2)	SMALL TYPE	ENTITY	OTHER TO SMALL EN
BASIC FEE		SMALL CLIP		RATE	FEE	
EXAMINATION FEE		SMALL ENT. = \$ 150 Palisfies PCT Article 33(1).	LARGE ENT. = \$ 3			RATE
		14) = \$50/tion	Alf other situations	EXAM. FEE		OR BASIC FEE
SEARCH FEE		ALL other countries =	ALL other situations			EXAM FEE
FEE FOR EXTRA SPE	C: PGS.	\$ 200 / \$ 400	\$ 260 /\$ 600	SEARCH FEE		SEARCH EEE
TOTAL CHARGEABLE	CLAIMS	mlnus 100 =	/ 50 =	X \$ 125 =	1	1-17
INDEPENDENT CLAIMS		minus 20 = *		X \$ 25 =	1	X \$ 250 =
MULTIPLE DEPENDENT		minus 3 =	5	X \$ 100 =	OF OF	X \$ 50 =
* If the difference in or	OLAIM PRESE	VT .		1	OR	X\$ 200 = 10
* If the difference in co	Plumn 1 is less	than zero, enter "0" ii	n column 2	+ \$ 180 =	OR	
		NDED - PART II		TOTAL	OR.	TOTAL 195
(C	olumn 1)					<u> </u>
	CLAIMS MAINING	(Column 2	(Column 3)	SMALL EN	ITITY OR	OTHER THAN
A AME	AFTER NDMENT	NUMBER PREVIOUSL	PRESENT		ADDI-	SMALL ENTITY
Total		PAID FOR	EXTRA	RATE	TIONAL	RATE TION
Total Independent	Minus		=	X \$ 25 =	FEE	FEE
	Minus	***	=	X \$ 100 =	OR	X \$ 50 =
T. COLITIAN	ON OF MULTIPL	E DEPENDENT CLAIM			OR	X \$ 200 =
				+ \$ 180 =	OR -	* \$ 360 =
(Colu	mn 1)	•		FFF	OR TO	OTAL ADDIT.
CLA REMAI	MS	(Column 2)	(Column 3)			
. AFT	ER I	NUMBER PREVIOUSLY	PRESENT	14	DDI-	
Total AMEND		PAID FOR	EXTRA	RATE TIO	NAL	RATE TIONAL
Independent: *	Minus	**	=		EE	RATE TIONAL FEE
	Minus	***		X \$ 25 =	OR X	\$ 50 =
FIRST PRESENTATION	OF MULTIPLE L	EPENDENT CLAIM		X \$ 100 =	OR X\$	200 =
		OLANA.		+ \$ 180 =	OR +s	360 =
•				OTAL ADDIT.		ADDIT.
				l.		FF
he entry to pate the second	•	nn 2, write "0" in column 3. SPACE is less than "20", er SPACE is less than "20", er			•	1